Fill in this information to identify your case.		Desc Main
	Document Hage 1 of 69	
United States Bankruptcy Court for the:		
Northern District of Illinois		
Case number (If known):	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	Chapter 12	
	Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called *ajoint* case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1: Identify Yourself					
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name					
	Write the name that is on your government-issued picture identification (for example, your	Roberto First name	Nancy First name			
	driver's license or passport).	Middle name	Middle name			
	Bring your picture identification to	Gradilla	Gradilla			
	your meeting with the trustee.	Last name	Last name			
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)			
2.	All other names you have used		Nancy			
	in the last 8 years	First name	First name			
	Include your married or maiden					
	names.	Middle name	Middle name			
			Sandoval Last name			
		Last name	Last name			
		First name	First name			
		Middle name	Middle name			
		Last name	Last name			
3.	Only the last 4 digits of your Social Security number or	xxx-xx- <u>2</u> <u>7</u> <u>9</u> <u>8</u>	xxx - xx - <u>4</u> <u>9</u> <u>2</u> <u>5</u>			
	federal Individual Taxpayer	OR	OR			
	Identification number (ITIN)	9xx - xx	9xx - xx			

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First Name

Middle Name

Last Name

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	☑I have not used any business names or EINs.	☑I have not used any business names or EINs.
	Include trade names and doing business as names	Business name	Business name
		Business name	Business name
		EIN	EIN
			<u></u>
5.	Where you live		If Debtor 2 lives at a different address:
		5158 West 64th Place Number Street	2729 S Homan Ave Number Street
		Chicago, IL 60638 City State ZIP Code	Chicago, IL 60623 City State ZIP Code
		Cook County	Cook County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing <i>this</i> district to file for bankruptcy	Check one:	Check one:
	district to the for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408)
		· · · · · · · · · · · · · · · · · · ·	

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First Name

Middle Name

Last Name

Par	rt 2: Tell the Court About Yo	ur Bank	ruptcy Case					
7.	The chapter of the Bankruptcy Code you are choosing to file under	(Form B2		scription of each, see Not the top of page 1 and ch			342(b) for Individuals Filing for Ban	kruptcy
8.	How you will pay the fee	abou order a pro	at how you may pay or. If your attorney is e-printed address. ed to pay the fee in r Filing Fee in Inst quest that my fee Is not required to, vapplies to your fan	v. Typically, if you are paying a submitting your payment in installments. If you challments (Official Form 1 be waived (You may requaive your fee, and may only size and you are una	ing the fee your be noose this op 03A). uest this optido so only if the to pay the	ourself, you may pehalf, your attorney stion, sign and atta- tion only if you are your income is les e fee in installmer	office in your local court for more de ay with cash, cashier's check, or mony may pay with a credit card or check of the <i>Application for Individuals to I</i> filling for Chapter 7. By law, a judge notes than 150% of the official poverty links). If you choose this option, you mu 03B) and file it with your petition.	ney with <i>Pay</i> may, e
9.	Have you filed for bankruptcy within the last 8 years?	✓ No.	District District		When When	MM / DD / YYYY	Case number	_
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No. □Yes.	District		When	M/DD/YYYY	Relationship to you Case number, if known Relationship to you Case number, if known	
11.	Do you rent your residence?	_	☑ No. Go to lin	ne 12. t <i>Initial Statement About a</i>			u want to stay in your residence? You (Form 101A) and file it with	

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Nancy
First Name

Middle Name Last Name

Par	t 3: Report About Any Busin	esses	You Own as a Sole Pr	oprietor			
		√ No	. Go to Part 4.				
12.	Are you a sole proprietor of any full- or part-time business?	☐ Yes	s. Name and location of busi	ness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as	— Na	me of business, if any				
	a corporation, partnership, or LLC.	Nu	mber Street				
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.	_					
		Cit	у		State	ZIP Code	
		Ch	eck the appropriate box to c	lescribe your busine	ess:		
			Health Care Business (as	defined in 11 U.S.C	s. § 101(27A))		
			Single Asset Real Estate (as defined in 11 U.S	S.C. § 101(51B))		
			Stockbroker (as defined in	11 U.S.C. § 101(53	A))		
			Commodity Broker (as defi	ned in 11 U.S.C. §	101(6))		
			None of the above				
	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business debtor?</i> For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).	deadlin operation operatio	es. If you indicate that you arons, cash-flow statement, an C. § 1116(1)(B). I am not filing under Chap Bankruptcy Code. I am filing under Chap Code. J am filing under Chap Code.	e a small business of federal income tax thapter 11. oter 11, but I am NO	debtor, you must a creturn or if any of T a small busines mall business deb	a small business debtor so the attach your most recent balance of these documents do not exist as debtor according to the defeator according to the definition according to the definition of the definition of the definition according to the definition of the defini	te sheet, statement of st, follow the procedure in inition in the in the Bankruptcy
14.	Do you own or have any	✓ No					
	property that poses or is alleged to pose a threat of	☐ Ye	s. What is the hazard? _				
	imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own		If immediate attention is	needed, why is it ne	eded?		
	perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number Stro	eet		
				City		State	ZIP Code

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First Name

Middle Name

Last Name

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

Disability. My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to	receive a	briefina	about	credit
sounceling become				

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational

decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing

in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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First Name

Middle Name

Last Name

Part 6: Answer These Question	ns for Reporting Purpo	ses		
16. What kind of debts do you have?	an individual primarily No. Go to line 16 Yes. Go to line 1 16b. Are your debts prima business or investmen No. Go to line 16 Yes. Go to line 1	for a personal, family business debts at or through the ope 6c.	ily, or household purpose."	
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?		r Chapter 7. Do you		roperty is excluded and administrative ured creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49 □ 50-99 □ 100-199 □ 200-999		1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,000-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	_ _ _	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be? Part 7: Sign Below	□ \$0-\$50,000 □ \$50,001-\$100,000 ☑ \$100,001-\$500,000 □ \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
For you I have expended to the proof of the	chosen to file under Chapter understand the relief available reey represents me and I did I and read the notice required t relief in accordance with the tand making a false statement	7, I am aware that I is under each chapter not pay or agree to puby 11 U.S.C. § 342(e) chapter of title 11, Ut, concealing proper	, and I choose to proceed under pay someone who is not an attorr b). United States Code, specified in	hapter 7, 11,12, or 13 of title 11, United States Chapter 7. ney to help me fill out this document, I have this petition. y by fraud in connection with a bankruptcy case § 152, 1341, 1519, and 3571. radilla a, Debtor 2

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First Name

Middle Name

Last Name

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Duenez Law LLC Duenez Law LLC, Attorney	Date <u>07/31/2017</u> MM / DD / YYYY
Duellez Law LLO, Allonley	MINI / DD / TTTT
Duenez Law LLC	
Printed name	
Lorena Duenez LLC	
Firm name	
2700 Patriot Boulevard 250	
Number Street	
Glenview	IL 60026
City	State ZIP Code
City	
Contact phone	State ZIP Code
•	State ZIP Code
Contact phone6307763	State ZIP Code

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Fill in this informat	tion to identify your cas	se and this filing.			L4:03:32	Desc Main
			Document	Page o ul us		
Debtor 1	Roberto		Gradilla			
	First Name	Middle Name	Last Name			
Debtor 2	Nancy		Gradilla			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ban	kruptcy Court for the:	North	ern District of Illinois			
Case number				_		Check if this is an amended filing
	rm 106A/B					
Schedule	e A/B: Prop	erty				12/15
fits best. Be as cor space is needed, a	mplete and accurate a ttach a separate shee	s possible. If two m t to this form. On th	narried people are filing e top of any additional		onsible for sup se number (if k	, , , ,
☑ No. Go to	, ,	quitable interest in	any residence, building	, land, or similar property?		
	•	•	your entries from Part	1, including any entries for pag	es 	\rightarrow

Official Form 106A/B Schedule A/B: Property page 1

Page 9 of 69 Documentila Debtor 2 Middle Name Last Name First Name Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No **√** Yes 3.1 Make: Dodge Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put the Debtor 1 only amount of any secured claims on Schedule D: **Neon SE** Model: Debtor 2 only Creditors Who Have Claims Secured by Property. 2003 Debtor 1 and Debtor 2 only Current value of the Current value of the Year: At least one of the debtors and another entire property? portion you own? Approximate mileage: \$400.00 \$400.00 Check if this is community property (see Other information: instructions) If you own or have more than one, list here: 3.2 Make: Hyunda Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put the ☐ Debtor 1 only amount of any secured claims on Schedule D: Santa Fe Model: Debtor 2 only Creditors Who Have Claims Secured by Property. 2003 Debtor 1 and Debtor 2 only Current value of the Current value of the Year: At least one of the debtors and another entire property? portion you own? 160000 Approximate mileage: \$1,200.00 \$0.00 Check if this is community property (see Other information: instructions) Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories **√** No ☐ Yes Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages \$400.00 you have attached for Part 2. Write that number here..... Describe Your Personal and Household Items Part 3: Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Household goods and furnishings Yes. Describe...... \$300.00

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Debtor 1

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Case 17-22755

Doc 1

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Middle Name Last Name First Name 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Computer and printer \$200.00 Yes. Describe...... Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles **√** No ☐ Yes. Describe...... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments **√** No Yes. Describe...... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment **✓** No Yes. Describe...... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Everyday clothing and shoes \$50.00 Yes. Describe...... Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ No Wedding rings Yes. Describe...... \$150.00 13. Non-farm animals Examples: Dogs, cats, birds, horses **✓** No ☐ Yes. Describe...... 14. Any other personal and household items you did not already list, including any health aids you did not list **√** No ☐ Yes. Describe...... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$700.00

for Part 3. Write that number here

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Nancy Middle Name Last Name First Name

Par	t 4: Desc	ribe Your Financial Assets					
Do	Do you own or have any legal or equitable interest in any of the following?						
16.	Cash Examples: ☐ No ☐ Yes	Money you have in your wallet, in your home, in	a safe deposit box, and on hand when you file your petition Cash	\$25.00			
		_					
17.	Deposits o Examples: No Yes	Checking, savings, or other financial accounts; similar institutions. If you have multiple account	certificates of deposit; shares in credit unions, brokerage houses, and other is with the same institution, list each.				
			Institution name:				
		17.1. Checking account:	Bank of America	\$25.00			
		17.2. Checking account:					
		17.3. Savings account:	Bank of America	\$300.00			
		17.4. Savings account:					
		17.5. Certificates of deposit:					
		17.6. Other financial account:					
		17.7. Other financial account:					
		17.8. Other financial account:					
		17.9. Other financial account:					
18.		tual funds, or publicly traded stocks Bond funds, investment accounts with brokerag	e firms, money market accounts				
19.	Non-public		and unincorporated businesses, including an interest in				
		ve specific tion about					

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ebtor 2	Nancy	DC	ocum e ratiila	Page 12 of 69	
	First Name	Middle Name	Last Nam	e	

20.	·		egotiable and non-negotiable instruments ushiers' checks, promissory notes, and money orders.	
	_		ransfer to someone by signing or delivering them.	
	☑ No			
	Yes. Give specific information about			
	them			
21.	Retirement or pension a	accounts		
	Examples: Interests in II	RA, ERISA, Keogh, 401(I	k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	No			
	✓ Yes. List each accounseparately.	t		
		Type of account:	Institution name:	
		401(k) or similar plan:	American Sugar Salary Savings and Investment Plan	\$3,983.51
22.	Security deposits and pro	repayments		
			that you may continue service or use from a company	
	, •	rith landlords, prepaid rent	t, public utilities (electric, gas, water), telecommunications companies, or	
	others ☑ No			
	Yes			
23.		a periodic payment of mor	ney to you, either for life or for a number of years)	
	√ No			
	Yes			
24.	Interests in an education	n IRA, in an account in a	qualified ABLE program, or under a qualified state tuition program.	
	26 U.S.C. §§ 530(b)(1), 5	529A(b), and 529(b)(1).		
	✓ No			
	☐ Yes			
25.	Trusts, equitable or future benefit	re interests in property (other than anything listed in line 1), and rights or powers exercisable for your	
	☑ No			
	Yes. Give specific	_		
	information about then	П		
26.	Patents, copyrights, trad	lemarks, trade secrets, a	and other intellectual property	
	Examples: Internet dom	ain names, websites, prod	ceeds from royalties and licensing agreements	
	✓ No			
	Yes. Give specific information about then	n		
27.	Licenses, franchises, an	d other general intangible	les	
	Examples: Building perr professional		cooperative association holdings, liquor licenses,	
	✓ No			
	Yes. Give specific information about then	n		

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28.	Tax refunds owed to you	
	☑ No	
	☐ Yes. Give specific information about	Federal:
	them, including whether you already filed the returns and the	State:
	tax years	Local:
29.	Family support	
	Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, p	roperty settlement
	☑ No	
	Yes. Give specific information	Alimony:
		Maintenance:
		Support:
		Divorce settlement:
		Property settlement:
30.	Other amounts someone owes you	
00.	Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' c	ompensation, Social
	Security benefits; unpaid loans you made to someone else	
	✓ No ☐ Yes. Give specific information	
	Tes. Give specific information	
31.	Interests in insurance policies	
	Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's	sinsurance
	☑ No	
	Yes. Name the insurance company of each policy and list its value	
	or cast, parity and notice factoring	
32.	Any interest in property that is due you from someone who has died	
	If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled because someone has died.	o receive property
	☑ No	
	Yes. Give specific information	
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment	
	Examples: Accidents, employment disputes, insurance claims, or rights to sue	
	Yes. Describe each claim	

Entered 07/31/17 14:03:32mber Desc. Main Case 17-22755 Doc 1 Filed 07/31/17 Debtor 1 Page 14 of 69 Documentilla Debtor 2 Nancy Middle Name Last Name First Name Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims **✓** No ☐ Yes. Describe each claim..... Any financial assets you did not already list ☐ Yes. Give specific information....... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here...... \$4,333.51 Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. 38. Accounts receivable or commissions you already earned Yes. Describe...... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ■ No Yes. Describe...... Machinery, fixtures, equipment, supplies you use in business, and tools of your trade ☐ No Yes. Describe...... 41. Inventory ☐ No Yes. Describe...... 42. Interests in partnerships or joint ventures □ No Yes. Describe...... Name of entity: % of ownership:

Documentilla Page 15 of 69 Debtor 2 Nancy Middle Name Last Name First Name 43. Customer lists, mailing lists, or other compilations ☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe...... 44. Any business-related property you did not already list ☐ Yes. Give specific information...... 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here...... Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? ✓ No. Go to Part 7. Yes. Go to line 47. 47. Farm animals Examples: Livestock, poultry, farm-raised fish ☐ No ☐ Yes..... 48. Crops—either growing or harvested ☐ No ☐ Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ☐ No ☐ Yes.....

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Debtor 1

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Documentilla Page 16 of 69 Debtor 2 Middle Name Last Name First Name Farm and fishing supplies, chemicals, and feed ☐ No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list ☐ No ☐ Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here...... Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership **√** No Yes. Give specific information..... 54. Add the dollar value of all of your entries from Part 7. Write that number here...... \$0.00 List the Totals of Each Part of this Form Part 1: Total real estate, line 2..... \$0.00 Part 2: Total vehicles, line 5 \$400.00 Part 3: Total personal and household items, line 15 57. \$700.00 Part 4: Total financial assets, line 36 \$4,333.51 58. Part 5: Total business-related property, line 45 \$0.00 59. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61..... \$5,433.51 Copy personal property total \$5,433.51 \$5,433.51 Total of all property on Schedule A/B. Add line 55 + line 62.....

Doc 1

Case 17-22755

Debtor 1

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Fill in this informati	ion to identify your cas	e			B 1/17 14:03:32	Desc Main
	ion to later they your cas		Document	Page 17 or or		
Debtor 1	Roberto		Gradilla			
	First Name	Middle Name	Last Name			
Debtor 2	Nancy		Gradilla			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ban	kruptcy Court for the:	Norti	nern District of Illinois			
Case number				_		☐ Check if this is an
(if known)						amended filing
Official Fo	rm 106C					-
Schedule	e C: The Pr	operty Y	<mark>ou Claim a</mark>	s Exempt		
Be as complete an	d accurate as possib	le. If two married p	eople are filing together	r, both are equally resp	oonsible for supplying c nat you claim as exempt.	

the fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Ра	art 1: Identify	the Property You Claim	as Exempt	-		
1.	Which set of ex ✓ You are clair ☐ You are clair	xemptions are you claiming? Coming state and federal nonbankruming federal exemptions. 11 U.S	Check one only, even if your ptcy exemptions. 11 U.S.(C. § 5	22(b)(3)	
۷.	Brief descriptio	ry you list on <i>Schedule A/B</i> that n of the property and line on nat lists this property	Current value of the portion you own Copy the value from Schedule A/B	A	mount of the exemption you claim heck only one box for each exemption.	Specific laws that allow exemption
	Brief description: Line from Schedule A/B:	2003 Dodge Neon SE VIN: 1B3ES26CXD131593	\$400.00	1	\$400.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
	Brief description: Line from Schedule A/B:	Household goods and furnishings	\$300.00	1	\$300.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
	Brief description: Line from Schedule A/B:	Computer and printer 7	\$200.00	1	\$200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
3.	(Subject to adjus ✓ No	ng a homestead exemption of metment on 4/01/19 and every 3 years acquire the property covered by	ears after that for cases file		, ,	

04/16

Case 17-22755 Nancy

Doc 1

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First Name

Middle Name

Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property		Current value of the Amount of portion you own		nount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Ch	neck only one box for each exemption.		
Brief description:	Everyday clothing and shoes	\$50.00	4	\$50.00	735 ILCS 5/12-1001(a), (e)	
Line from Schedule A/B:	<u>11</u>			100% of fair market value, up to any applicable statutory limit		
Brief description:	Wedding rings	\$150.00	1	\$150.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B:	12			100% of fair market value, up to any applicable statutory limit		
Brief description:	Cash	\$25.00	4	\$25.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B:	16			100% of fair market value, up to any applicable statutory limit		
Brief description:	Bank of America Checking account	\$25.00	4	\$25.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B:	<u>17</u>			100% of fair market value, up to any applicable statutory limit		
Brief description:	Bank of America Savings account	\$300.00	4	\$300.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B:	<u>17</u>			100% of fair market value, up to any applicable statutory limit		
Brief	American Sugar Salary Savings and Investment	\$3,983.51	1	\$3,983.51	735 ILCS 5/12-1006	
description:	Plan			100% of fair market value, up to any applicable statutory limit		
Schedule A/B:	<u>21</u>					

Fill in this informati	ion to identify your case.					.7 14:03:32	Desc Main	
5.1.			Document	Page 19 01	09			
Debtor 1	Roberto First Name Midd	dle Name	Gradilla Last Name		-			
D.1.		alo Hamo						
Debtor 2 (Spouse, if filing)	Nancy First Name Midd	dle Name	Gradilla Last Name		-			
United States Banl	kruptcy Court for the:		rn District of Illinois	S				
Case number (if known)							Check if this is an	
· · · · · · · · · · · · · · · · · · ·							amended filing	
Official Fo	rm 106D							
Schedule	D: Creditors	: Who H	łave Clair	ns Secure	ad ba	y Propert	V	40/45
						•		12/15
needed, copy the A	d accurate as possible. If tw Additional Page, fill it out, nu							
known).								
	have claims secured by you							
	is box and submit this form to	o the court with y	our other schedules.	. You have nothing els	se to repo	rt on this form.		
Yes. Fill in all	of the information below.							
Part 1: List A	II Secured Claims							
2. List all secure	d claims. If a creditor has mo	ore than one sec	cured claim, list the c	creditor separately for	each	Column A	Column B	Column C
	than one creditor has a partic			Part 2. As much as p	oossible,	Amount of claim	Value of	Unsecured
list the claims	in alphabetical order accordir	ng to the credito	rs name.			Do not deduct the	collateral that	portion
						value of collateral.	supports this claim	If any
2.1 Total Finance	LLC	Describe	e the property that s	secures the claim:		\$3,268.0	00 \$0.00	\$2,068.00
Creditor's Name	е	2003 Hy	yunda Santa Fe					
3400 N Pulas Number	ki Rd Street	<u> </u>	,					
Chicago, IL 60		As of the	e date you file, the c	laim is: Check all tha	t apply.			
City	State ZIP Co		•		,			
Who owes the	e debt? Check one.	Unlqu	•					
Debtor 1 or	•	Dispu	uted					
Debtor 2 or	•	Nature o	of lien. Check all that	apply.				
	nd Debtor 2 only	☑ An ag	greement you made ((such as mortgage or				
At least one	e of the debtors and another	secur	red car loan)					
	is claim relates to a			lien, mechanic's lien)			
community	y aept	☐Judgr	ment lien from a laws	suit				
Date debt was Sep 01, 2011	sincurred	Other	r (including a right to	offset)				
00001,2011		— Last 4 di	igits of account nu	mber <u>4 9 2 5</u>	5			
		_uo. 4 ui	.g or account har		<u></u>			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$3,268.00

Part 1

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Additional Page After listing any entries or with 2.3, followed by 2.4, a	this page, number them beginning and so forth.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Describe the property that secures the claim:			
Creditor's Name				
Number Street	As of the date you file, the claim is: Check all that apply.			
City State ZIP Code	Contigent			
Who owes the debt? Check one.	☐ Unlquidated			
Debtor 1 only	☐ Disputed			
Debtor 2 only	Nature of lien. Check all that apply.			

Debtor 1 and Debtor 2 only ☐ An agreement you made (such as mortgage or secured car loan) At least one of the debtors and another ☐ Statutory lien (such as tax lien, mechanic's lien) Check if this claim relates to a ☐ Judgment lien from a lawsuit community debt Other (including a right to offset) Date debt was incurred Last 4 digits of account number ____ Add the dollar value of your entries in Column A on this page. Write that number here: \$0.00 If this is the last page of your form, add the dollar value totals from all pages. Write that number

\$3,268.00

			-:		107/04/47 4 4 6			
Fill in this informat	ion to identify your case	e.			1/17 14: 0)3:32 De	sc Main	
Dobtor 1	Deboute		Credille	Paye 21	01 09			
Debtor 1	Roberto First Name	Middle Name	Gradilla Last Name					
Dahtan 0								
Debtor 2 (Spouse, if filing)	Nancy First Name	Middle Name	Gradilla Last Name					
United States Ban	kruptcy Court for the:	Nortne	ern District of Illinois					
Case number (if known)				_			Check if this is a	n
Official Fo	rm 106E/F							
Schedule	e E/F: Cred	itors Who	Have Uns	secure	d Claims			12/15
 Do any credit No. Go to Yes. List all of you identify what t possible, list the 	ur priority unsecured c type of claim it is. If a cla	ecured claims agains claims. If a creditor had aim has both priority a all order according to	as more than one priori and nonpriority amounts the creditor's name. If y	s, list that claim you have more	aim, list the creditor sep here and show both pric than two priority unsecu	ority and nonprio	rity amounts. As	much as
(For an explai	nation of each type of c	laim, see the instruct	ions for this form in the	instruction boo	klet.)			
						Total claim	Priority amount	Nonpriority amount
24						\$3,535.54	\$3,535.54	\$0.00
2.1 Rosales, A			Last 4 digits of ac			<u> </u>	<u> </u>	
, , , , ,			When was the del		02/03/2017			
Number	Street		 As of the date you apply. 	i ille, trie Cialifi	is. Check all that			
Chicago,	IL		Contingent					
City	Sta	ate ZIP Code	Unliquidated					
	red the debt? Check of	one.	Disputed					
☑ Debtor			Type of PRIORITY	unsecured cla	nim:			
☐ Debtor	•		✓ Domestic supplements					
	1 and Debtor 2 only	Lawathan	Taxes and cert	tain other debts	you owe the			
	t one of the debtors and		government		- 1			
	if this claim is for a co	mmunity debt	Claims for dea intoxicated	itn or personal i	njury while you were			
Is the clain ☑ No ☐ Yes	n subject to offset?		Other. Specify					

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First Name

Middle Name

Last Name

Nonpriority Creditor's Name 4Westchester PIz Bldg 4 Number Street Elmsford, NY 10523-1612 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes When was the debt incurred? O9/02/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	Par	2: List All of Your NONPRIORITY Unsecured Clair	ms	
Last 4 digits of account number 2002 All Carlos and a particular claim, list the confort expensable for search claims. For each claims listed, selently when placed claims in the particular claim, list the other creditors in Part 3. If you have more than none creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. AMCA Collection Agency Nonpromy Creditors Name AWestchester Piz Bildig 4 Number 7 Street Elmatord, NY 10523-1612 City Street 2/P Code Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 and Debtor 2 only Debtor 3 and Debtor 2 only Debtor 1 and Debtor 2 conly All least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 1 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only		$oxedsymbol{\square}$ No. You have nothing to report in this part. Submit this form to the		
Author Collection Agency Last 4 digits of account number 200X \$30.00	4.	List all of your nonpriority unsecured claims in the alphabetical cunsecured claim, list the creditor separately for each claim. For each than one creditor holds a particular claim, list the other creditors in P	h claim listed, identify what type of claim it is. Do not list claims already	included in Part 1. If more
Memoration Creditor's Name When was the debt incurred? 080022015 As of the date you file, the claim is: Check all that apply. Contingent Uniquidated Disputed Di		alt 2.		Total claim
Nemoritative Creditor's Name Affective Name Affective Name Street	4.1	AMCA Collection Agency	Last 4 digits of account number xxxx	\$30.00
Number Street Confingent Indiquidated Contingent Indiquidated				
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City State ZIP Code Disputed			☐ Contingent	
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At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts		•	Obligations arising out of a separation agreement or	
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A.3 Bank of America Nonpriority Creditor's Name PO Box 982235 Number Street El Paso, TX 79998-2235 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? I Last 4 digits of account number 3987 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card		Is the claim subject to offset?	Carion Opcomy	
Bank of America Last 4 digits of account number 3987 \$390.36			Credit Card	
Nonpriority Creditor's Name PO Box 982235 Number Street El Paso, TX 79998-2235 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Nonpriority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card		☐ Yes		
Nonpriority Creditor's Name PO Box 982235 Number Street EI Paso, TX 79998-2235 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? When was the debt incurred? As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Unliquidated Disputed Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Unliquidated Disputed Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	4.3	Bank of America	Last 4 digits of account number 3987	\$390.36
As of the date you file, the claim is: Check all that apply. EI Paso, TX 79998-2235 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card			<u> </u>	
El Paso, TX 79998-2235 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card		PO Box 982235		
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card				
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card		·		
Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card		•	·	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card			•	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debtor 1 and Debtor 2 only □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card				
□ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ At least one of the debtors and another □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify □ Credit Card				
□ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Check if this claim is for a community debt □ Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card			, , , , ,	
Is the claim subject to offset? Other. Specify Credit Card				
☑ No Credit Card		•		

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Middle Name Last Name First Name

	vith 4.5, followed by 4.6, and so forth.	Total claim
Conserve	Last 4 digits of account number xxxx	\$1,04
Ionpriority Creditor's Name	When was the debt incurred? 02/01/2016	
200 CrossKeys Office Park	As of the date you file, the claim is: Check all that apply.	
lumber Street	☐ Contingent	
Fairport, NY 14450-0007 City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	☐ Student loans	
	 Obligations arising out of a separation agreement or 	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	divorce that you did not report as priority claims	
At least one of the debtors and another Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
s the claim subject to offset?	☐ Other. Specify	
∕ I No	Educational	
Yes		
Convergent Outsourcing Inc	Last 4 digits of account number xxxx	\$417
Ionpriority Creditor's Name	When was the debt incurred? 03/14/2016	
Po Box 9004	As of the date you file, the claim is: Check all that apply.	
lumber Street	☐ Contingent	
Renton, WA 98057-9004 City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or 	
☐ At least one of the debtors and another	divorce that you did not report as priority claims	
At least one or the deptors and another Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
s the claim subject to offset?	✓ Other. Specify	
1 No		
☐ Yes		
Credit Collection Services	Last 4 digits of account number xxxx	\$14
Ionpriority Creditor's Name	When was the debt incurred? 01/14/2016	
725 Canton St lumber Street	As of the date you file, the claim is: Check all that apply.	
Norwood, MA 02062-2679	☐ Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	☐ Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
At least one of the debtors and another	divorce that you did not report as priority claims	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other	
	similar debts ☑ Other. Specify	
s the claim subject to offset? 1 No	✓ Other. Specify Medical	
2 No		

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

Middle Name

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Dynamic Recovery Solutions	Last 4 digits of account number 1xxx	\$951.7
Nonpriority Creditor's Name	When was the debt incurred? 12/22/2016	
Po Box 25759	As of the date you file, the claim is: Check all that apply.	
Number Street	☐ Contingent	
Greenville, SC 29616-0759 City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
At least one of the debtors and another	divorce that you did not report as priority claims	
Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
Is the claim subject to offset? No	Other. Specify Credit Card	
☐ Yes		\$787.
Enhanced Recovery Corp Nonpriority Creditor's Name	Last 4 digits of account number	
Po Box 57547	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
Jacksonville, FL 32241-7547	Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	☐ Student loans	
☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
At least one of the debtors and another	divorce that you did not report as priority claims	
☐ Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
Is the claim subject to offset?	Other. Specify	
☑ No	Cable/Cellular	
Yes		
ERC	Last 4 digits of account number 9316	\$786.
Nonpriority Creditor's Name	When was the debt incurred? 06/08/2016	
Po Box 1259 98696	As of the date you file, the claim is: Check all that apply.	
Number Street	As of the date you me, the claim is: Check all that apply. Contingent	
Oaks, PA 19456-1259 City State ZIP Code	Unliquidated	
	☐ Disputed	
Who incurred the debt? Check one.	•	
Debtor 1 only	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 2 only	 Student loans Obligations arising out of a separation agreement or 	
Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
☐ Check if this claim is for a community debt	similar debts	
Is the claim subject to offset?	Other. Specify	
☑ No	Cell Phone	
☐ Yes		

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Part	2: Your NONPRIORITY Unsecured Claims - Cor	ntinuation Page	
Afte	listing any entries on this page, number them beginning w	rith 4.5, followed by 4.6, and so forth.	Total claim
4.10	Exeter Finance Nonpriority Creditor's Name Po Box 166097 Number Street Irving, TX 75016-6097	Last 4 digits of account number 2798 When was the debt incurred? 06/28/2017 As of the date you file, the claim is: Check all that apply. Contingent	\$11,000.00
	City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	 ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Car Loan 	
4.11	Eye Center Physicians Ltd Nonpriority Creditor's Name 1725 W Harrison St Ste 906 Number Street Chicago, IL 60612-3848 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? You No Yes	When was the debt incurred? 02/08/2012 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Medical	<u>\$40.00</u>
4.12	First National Collection Bureau Inc Nonpriority Creditor's Name 610 Waltham Way Number Street Mccarran, NV 89434-6695 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number xxxx When was the debt incurred? 08/11/2016 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Cell Phone	<u>\$191.37</u>

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Part	2: Your NONPRIORITY Unsecured Claims - Con	itinuation Page	
Afte	r listing any entries on this page, number them beginning w	ith 4.5, followed by 4.6, and so forth.	Total claim
4.13	First National Collection Bureau Inc Nonpriority Creditor's Name 610 Waltham Way	Last 4 digits of account number xxxx When was the debt incurred? 03/03/2016 As of the date you file, the claim is: Check all that apply.	\$1,250.24
	Mumber Street Mccarran, NV 89434-6695 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only ☑ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	
4.14	Great Lakes Higher Education Nonpriority Creditor's Name 2401 International Ln Number Street Madison, WI 53704-3121 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: ☑ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Student Loans	<u>\$50,020.00</u>
4.15	Heller and Frisone, Ltd Nonpriority Creditor's Name 33 N La Salle St Ste 1200 Number Street Chicago, IL 60602-3415 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? You No Yes	Last 4 digits of account number xxxx When was the debt incurred? 03/23/2012 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Credit	<u>\$340.54</u>

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

Middle Name

First Name

Afte	listing any entries on this page, number them beginning with 4.5	i, followed by 4.6, and so forth.	Total claim
4.16	JA SFR LLC Nonpriority Creditor's Name 626 W Randolph St Ste 1 Number Street Chicago, IL 60661-2213 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Last 4 digits of account number 4925 When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Past Due Rent	<u>\$12,000.00</u>
4.17	✓ No ✓ Yes Kremin David K & Associates Nonpriority Creditor's Name	Last 4 digits of account number 0996 When was the debt incurred? 10/01/1999	\$50,000.00
	221 N LaSalle St 1900 Number Street Chicago, IL 60601 City State ZIP Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? ☑ No □ Yes Remarks: Spann Lindareen	Other. Specify PI case	

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

First Name

After	listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
4.18	Midland Credit Management Inc	Last 4 digits of account number 5xxx	\$3,000.00
	Nonpriority Creditor's Name	When was the debt incurred? 08/13/2015	
	2365 Northside Dr # 300	As of the date you file, the claim is: Check all that apply.	
	Number Street	☐ Contingent	
	San Diego, CA 92108-2709 City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	☐ Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
	Is the claim subject to offset? ☑ No	Other. Specify Credit Card	
	☐ Yes		
4.19	Midland Credit Management Inc	Last 4 digits of account number xxxx	\$2,999.64
	Nonpriority Creditor's Name	When was the debt incurred? 03/28/2017	
	2365 Northside Dr # 300	As of the date you file, the claim is: Check all that apply.	
	Number Street	Contingent	
	San Diego, CA 92108-2709 City State ZIP Code		
	,	☐ Unliquidated☐ Disputed☐ Disputed	
	Who incurred the debt? Check one.		
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	☐ Student loans	
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
	☐ Check if this claim is for a community debt	similar debts	
	Is the claim subject to offset? ☑ No	Other. Specify Credit Card	
	☐ Yes		
4.20	Navient	Last 4 digits of account number 4925	\$10,655.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	Po Box 9655 Number Street	As of the date you file, the claim is: Check all that apply.	
	Wilkes Barre, PA 18773-9655	☐ Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	☑ Student loans	
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or 	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
	Is the claim subject to offset?	Other. Specify	
	☑ No	Student Loan	
	☐ Yes		

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Afte	listing any entries on this page, number them beginning w	ith 4.5, followed by 4.6, and so forth.	Total claim
4.21	North Shore Agency Nonpriority Creditor's Name 270 Spagnoli Rd Ste 110 Number Street	Last 4 digits of account number 5xxx When was the debt incurred? 03/08/2016 As of the date you file, the claim is: Check all that apply. □ Contingent	\$24.00
	Melville, NY 11747-3515 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only ☑ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes	 Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Account 	
4.22	Penn Credit Corporation Nonpriority Creditor's Name 916 S 14th St, PO Box 988 Number Street Harrisburg, PA 17108-0988 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	When was the debt incurred? 06/01/2016 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Non-Retailer Use Tax	\$116.77
4.23	RJM Acquisitions LLC Nonpriority Creditor's Name 575 Underhill Blvd # 224bldv Number Street Syosset, NY 11791-3426 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Yes	Last 4 digits of account number xxxx When was the debt incurred? 09/04/2014 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Credit Card	<u>\$440.66</u>

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Part 2: Your NONPRIORITY Unsecured Claims - Co	ontinuation Page	
After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
.24 Southwest Credit	Last 4 digits of account number 3xxx	\$773.01
Nonpriority Creditor's Name	When was the debt incurred? 05/01/2016	
4120 International Pkwy Ste 1100	As of the date you file, the claim is: Check all that apply.	
Number Street	☐ Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	☐ Student loans	
,	Obligations arising out of a separation agreement or	
Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
☐ Check if this claim is for a community debt	similar debts	
Is the claim subject to offset?	Other. Specify	
☑ No	Utility	
☐ Yes		
25 Stuart Lipman and Associates Inc	Last 4 digits of account number xxxx	\$764.29
Nonpriority Creditor's Name	When was the debt incurred? 05/23/2015	
5447 E 5th St Ste 110 Number Street	As of the date you file, the claim is: Check all that apply.	
Tucson, AZ 85711-2345	☐ Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	☐ Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
At least one of the debtors and another	divorce that you did not report as priority claims	
☐ At least one of the debtors and another☐ Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
Is the claim subject to offset?	✓ Other. Specify	
✓ No	Credit Card	
☐ Yes		
	Last A Matter of an army transplant areas	\$3,268.00
26 Total Finance LLC Nonpriority Creditor's Name	Last 4 digits of account number xxxx	
3400 N Pulaski Rd	When was the debt incurred? 09/01/2011	
Number Street	As of the date you file, the claim is: Check all that apply.	
Chicago, IL 60641-4023	Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	☐ Student loans	
☑ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
At least one of the debtors and another	divorce that you did not report as priority claims	
Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
Is the claim subject to offset?	Other. Specify	
☑ No	Auto Ioan	
☐ Yes		

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Afte	r listing any entries on this page, number them beginning w	rith 4.5, followed by 4.6, and so forth.	Total claim
4.27	University of Illinois at Chicago	Last 4 digits of account number 5xxx	\$57.00
	Nonpriority Creditor's Name	When was the debt incurred? 12/05/2013	
	M/C Billing and Collections	As of the date you file, the claim is: Check all that apply.	
	801 S Paulina	— Contingent	
	Number Street	☐ Unliquidated	
	Chicago, IL 60612-7210 City State ZIP Code	Disputed	
	•	Type of NONPRIORITY unsecured claim:	
	Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
		 Obligations arising out of a separation agreement or 	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
		 Debts to pension or profit-sharing plans, and other 	
	_	similar debts	
	☐ Check if this claim is for a community debt	☑ Other. Specify Medical	
	Is the claim subject to offset?	Modera	
	☑ No		
	Yes		
4.28	Universtiy Pathologists	Last 4 digits of account number 6xxx	<u>\$17.50</u>
	Nonpriority Creditor's Name	When was the debt incurred? 11/11/2015	
	5700 Southwyck Blvd Number Street	As of the date you file, the claim is: Check all that apply.	
	Toledo, OH 43614-1509	☐ Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☐ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 2 only	☐ Student loans	
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or 	
	☐ At least one of the debtors and another	divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
	Is the claim subject to offset?	☑ Other. Specify	
	☑ No	Medical	
	☐ Yes		
4.29	US Department of Education	Last 4 digits of account number 4925	\$60,550.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 7202	As of the date you file, the claim is: Check all that apply.	
	Number Street	Contingent	
	Utica, NY 13504-7202 City State ZIP Code	Unliquidated	
	•	☐ Disputed	
	Who incurred the debt? Check one.	·	
	☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans	
	_	Student loansObligations arising out of a separation agreement or	
	Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
	☐ Check if this claim is for a community debt	similar debts	
	Is the claim subject to offset?	Other. Specify	
	☑ No	Student Loan	
	Yes		

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Last Name

Roberto DOCUMenatilla Page 32 of 69
Nancy Gradilla

Middle Name

Case number (if known)

Part	ვ.	List	Others	to Be	Notified	About a	a Deht	That	You Alrea	adv Listed
ant	J.	LIST	Others	IO DC	Nothieu	About	וטבטנ ג	mat	TOU All Co	ady Listed

First Name

	or any of	the debts that	your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection omeone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, It you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional person r submit this page.				
Roosevelt University			On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Name		_					
Office of Tuition							
430 S. Michigan Ave			Part 2: Creditors with Nonpriority Unsecured Claims				
Number Street			Last 4 digits of account number xxxx				
Chicago, IL 60605			2001 Talgito of account familion 2000				
City	State	ZIP Code					
National Credit Management			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name			Line 4.4 of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims				
PO Box 32900 Number Street							
			Part 2: Creditors with Nonpriority Unsecured Claims				
Saint Louis, MO 63132-8900	State	ZIP Code	Last 4 digits of account number xxxx				
City	State	ZIF Code					
SKO Brenner American Inc			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name			Line 4.21 of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims				
Po Box 230 Number Street			Part 2: Creditors with Nonpriority Unsecured Claims				
Farmingdale, NY 11735-0230			Part 2: Creditors with Nonpriority Unsecured Claims				
City	State	ZIP Code	Last 4 digits of account number 5xxx				
Convergent Outsourcing Inc			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name			Line A2A of (Check and). D. Dort & Conditions with Driving Uncommed Claims				
Po Box 9004			Line 4.24 of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims				
Renton, WA 98057-9004	State	ZIP Code	Last 4 digits of account number 3xxx				
City	State	ZIP Code					
AFNI			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name			Line 4.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Po Box 3517							
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims				
Bloomington, IL 61702-3517	Ctoto	ZID Codo	Last 4 digits of account number 9316				
City	State	ZIP Code					
RPM LLC			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name							
20816 44th Ave W			Line 4.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims				
Lynnwood, WA 98036-7744		710.0	Last 4 digits of account number 9316				
City	State	ZIP Code	Last 7 digits of account number 3310				
Allied Interstate LLC			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name			Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Po Box 361477							
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims				
Columbus, OH 43236-1477	04-4-	7ID C- 1-	Last 4 digits of account number 1xxx				
City	State	ZIP Code	Last 7 digits of account number 1777				

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Last Name

First Name

Debtor 1	Roberto
Debtor 2	Nancy

Gradilla

Middle Name

Documenatilla Page 33 of 69

Case number (if known)

Part 3: List Others to Be Notified About a Debt That You Already Listed Additional Page **Capital Management Services LP** Name 698 1/2 S Ogden St Number Street Buffalo, NY 14206-2317 ZIP Code State On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 1xxx TrustMark Recovery Services Name 541 Otis Bowen Dr Number Street Munster, IN 46321-4158 ZIP Code State City On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.11 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 5xxx T Mobile Name Po Box 53410 Number Street Bellevue, WA 98015-3410 ZIP Code State On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number xxxx Allied Interstate LLC Name Po Box 361477 Street Columbus, OH 43236-1477 City ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims ☑ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number xxxx Fulton Friedman & Gullace LLP Name Po Box 2123 Street Warren, MI 48090-2123 ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number xxxx **Recovery Partners LLC** Name 4151 N Marshall Way Ste 12 Number Street Scottsdale, AZ 85251-3839

Case 17-22755 Doc 1 Filed 07/31/17 Entered 07/31/17 14:03:32 Documenatiiia Page 34 of 69 Debtor 1 Roberto

Desc Main Case number (if known)

Debtor 2

Gradilla Nancy First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

And the Ameunts for Each Type of Chiscoarea Claim											
	6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.										
				Total claim							
Total claims	6a. Domestic support obligations	6a.		\$3,535.54	'						
from Part 1	6b. Taxes and certain other debts you owe the government	6b.		\$0.00							
	6c. Claims for death or personal injury while you were intoxicated	6c.		\$0.00							
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+	\$0.00							
	6e. Total. Add lines 6a through 6d.	6e.		\$3,535.54							
					ı						
				Total claim							
Total claims	6f. Student loans	6f.		\$60,675.00							
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.		\$0.00							
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.		\$0.00							
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+	\$155,448.78	1						
	6j. Total. Add lines 6f through 6i.	6j.		\$216,123.78							

Fill in this informat	ion to identify your cas			<u> </u>	3 1/17 14:03:32	Desc Main
			Document	Page 35 01 05		
Debtor 1	Roberto		Gradilla			
	First Name	Middle Name	Last Name			
Debtor 2	Nancy		Gradilla			
(Spouse, if filing)	First Name	Middle Name	Last Name	_		
United States Ban	kruptcy Court for the:	North	nern District of Illinois			
Case number						
(if known)						☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with who	om you have	e the contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	

					■ 1/17 1 /·∩つ·つつ	Dogo Main
Fill in this informati	on to identify your cas	e.			3 1/17 14:03:32	Desc Main
			Document	Page 30 UF 0	9	
Debtor 1	Roberto		Gradilla			
•	First Name	Middle Name	Last Name			
Debtor 2	Nancy		Gradilla			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: No			hern District of Illinois			
Case number						☐ Check if this is an
(if known)						amended filing
~						amendeu IIIIIg

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a ☑ No ☐ Yes	codebtor.)							
 Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, Califor Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) ✓ No. Go to line 3. 									
	Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?								
	□No								
	Yes. In which community state or territory did you live?	Fill in the name and current address of that person.							
	Name								
	Number Street								
	City State ZIP Code								
3.	In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if y codebtor only if that person is a guarantor or cosigner. Make sure you have listed the Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or	ne creditor on Schedule D (Official Form 106D), Schedule E/F (Official							
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt							
		Check all schedules that apply:							
3.1		Schedule D, line							
	Name	Schedule E/F, line							
	Number Street	Schedule G, line							
	- Cited								
	City State ZIP Code								
3.2		Schedule D, line							
	Name	Schedule E/F, line							
	Number Street	Schedule G, line							
	City State ZIP Code								
3.3	l	Schedule D, line							
	Name	Schedule E/F, line							
	Number Street	Schedule G, line							
	City State ZIP Code								

		4= 40=		= 10 4 14 = ==		⊒ 421/17 1	14:03:32	Desc Main	
Fil	in this information	on to identify your cas		тисти та	ge or or		14.03.32	Desc Main	
De	ebtor 1	Roberto	Gradilla						
		First Name	Middle Name Last N						
	ebtor 2 couse, if filing)	Nancy First Name	Middle Name Last N			_	Check	if this is:	
٠.		cruptcy Court for the:	Northern Distric					amended filing	
	ise number	auptoy ocurrior and						upplement showing p	
(if I	known)						Ula	pter 13 income as of	trie following date
							MM	/ DD / YYYY	
Of	ficial For	m 106l							
So	chedule	: I: Your In	come						12/15
info spo add	rmation. If you use is not filing itional pages, w	are married and not with you, do not incl	e. If two married people are fil filing jointly, and your spouse ude information about your sase number (if known). Answe	is living with you, pouse. If more sp	include infor	mation about	t your spouse. I	f you are separated	and your
1.	Fill in your em	plovment							
	information.	proyo		Debtor 1			Debte	or 2 or non-filing s	oouse
	If you have mor	e than one iob.	Employment status	☑ Employed			✓ Employ	yed	
	attach a separa	ate page with	, ,	☐ Not Employed			□ _{Not En}	nployed	
	employers.	out additional	Occupation	Laborer			Paralegal		
	Include part tim	ne, seasonal, or	Employer's name	American Sugar I	Refining Inc		Institute fo	or Latino Progress	
	Occupation ma	y include student	Employer's address	1 N Clematis St				estern Ave	
	or homemaker	, if it applies.	, ,	Number Street			Number S	Street	
				West Palm Beach	, FL 33401 State	Zin Codo	Chicago, I	IL 60608-4809 State	- Zin Codo
			How long employed there?	City 10 years	State	Zip Code	10 years		Zip Code
Da	art 2: Give D	Details About Mor	athly Income						
Г	art z. Give L	Details About Moi	itiny income						
	Estimate mon are separated.	thly income as of the	date you file this form. If you	have nothing to rep	ort for any line	e, write \$0 in th	he space. Includ	e your non-filing spo	use unless you
		on-filing spouse have i ate sheet to this form.	more than one employer, combi	ne the information f	or all employe	ers for that pers	son on the lines l	below. If you need m	ore space,
					Fo	r Debtor 1	For Debtor non-filing s		
2.		• , ,	nd commissions (before all pay late what the monthly wage wou	,		\$3,094.00	\$2	2,724.80	
3.	Estimate and	list monthly overtime	рау.	3.	+	\$174.03	+	\$0.00	

4. Calculate gross income. Add line 2 + line 3.

\$3,268.03

\$2,724.80

Case 17-22755

Doc 1

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Nancy First Name

Middle Name

Last Name

			For Deb	tor 1	For Debte		
	Copy line 4 here→	4.	\$3,26	8.03		\$2,724.80	
5.	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a.	\$58	<u>87.90</u>		\$384.50	
	5b. Mandatory contributions for retirement plans	5b.	\$	0.00		\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$9	2.82		\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$	0.00		\$0.00	
	5e. Insurance	5e.	\$23	9.72		\$212.28	
	5f. Domestic support obligations	5f.	\$79	9.28		\$0.00	
	5g. Union dues	5g.	\$	0.00		\$0.00	
	5h. Other deductions. Specify: See additional page	5h.	+\$3	39.39	+	\$0.00	
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$1,75	9.12		\$596.78	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$1,50			\$2,128.02	
8.	List all other income regularly received:						
	8a. Net income from rental property and from operating a business, profession, or farm						
	Attach a statement for each property and business showing gross receipts,						
	ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00		\$0.00	
	8b. Interest and dividends	8b.	\$	0.00		\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive						
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	90	\$	0.00		\$0.00	
	8d. Unemployment compensation	8c. 8d.		60.00		\$0.00	
	8e. Social Security	8e.		60.00		\$0.00	
	8f. Other government assistance that you regularly receive	00.					
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
	Specify:	8f.	\$	0.00		\$0.00	
	8g. Pension or retirement income	8g.	\$	0.00		\$0.00	
	8h. Other monthly income. Specify:	8h.	+	0.00	+	\$0.00	
	, opooliy.						
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.		00.00		\$0.00	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse	10.	\$1,50	<u>)8.91</u> +		\$2,128.02	= \$3,636.9
11.	State all other regular contributions to the expenses that you list in Schedule .	J.					
	Include contributions from an unmarried partner, members of your household, your diffiends or relatives.	lepende	ents, your roomma	ites, and ot	her		
	Do not include any amounts already included in lines 2-10 or amounts that are not a	vailable	to pay expenses	listed in So	hedule J.		
	Specify:					11. +	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The resu amount on the Summary of Your Assets and Liabilities and Certain Statistical Inform			y income. \	Vrite that	12.	\$3,636.9
	,	,	11 -				Combined
							monthly income
13.	Do you expect an increase or decrease within the year after you file this form?						
	☑No. ☐Yes. Explain:						
	<u> —</u> 103. Елріані.						

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First Name

Middle Name

Last Name

	Amount
. Other Deductions For Debtor 1	
Dental Insurance	\$7.24
Vision Care	\$1.85

Fill in this inform	mation to identify your case.			4:03:32	Desc Main
Dahtan 4	Dahanta	Document	Paye 40 01 09		
Debtor 1	Roberto First Name	Gradilla Middle Name Last Name	Chock	if this is:	
Debtor 2	Nancy	Gradilla		amended filing	
(Spouse, if filing		Middle Name Last Name		arrierided lilling applement show	ing postpetition
United States E	Bankruptcy Court for the:	Northern District of Illino	ala a		as of the following date:
Case number			MAN	/ DD / YYYY	_
(if known)				70071111	
Official E	form 106 l				
	form 106J				
Schedu	ile J: Your Ex	penses			12/15
		If two married people are filing togeth On the top of any additional pages, v			
Part 1: Des	scribe Your Household	1			
1. Is this a jo	int case?				
☐No. Go	to line 2.				
Yes. Do	oes Debtor 2 live in a separ	ate household?			
	□No				
[Yes. Debtor 2 must file O	fficial Form 106J-2, Expenses for Sepa	arate Household of Debtor 2.		
2. Do you ha	ve dependents?	□No			
Do not list Debtor 2.	Debtor 1 and	$\mathbf{\Delta}$ Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent age	d's Does dependent live with you?
	e the dependents' names.	each dependent	Desici 1 of Desici 2	age	✓ No.
			Child	19	□ _{Yes.}
			Child	18	M _{No.} □ _{Yes.}
			Cillia		□No
				_	── ☐ Yes ☐ No
				_	— Tes
					— □No □Yes
3. Do your ex	penses include expenses	✓No			2 133
•	other than yourself and	Yes			
Part 2: Est	timate Your Ongoing N	Monthly Expenses			
		ruptcy filing date unless you are using mental <i>Schedule J</i> , check the box at t			preport expenses as of a date after
Include expen	ses paid for with non-cash	government assistance if you know	the value of		Your expenses
such assistan	ce and have included it on	Schedule I: Your Income (Official Fo	rm 106l.)		тош охроноос
4. The rental ground or	• •	ses for your residence. Include first mo	ortgage payments and any rent for the	4. <u>-</u>	\$750.00
If not inclu	ıded in line 4:				
4a. Real es	state taxes			4a	\$0.00
4b. Propert	ty, homeowner's, or renter's	insurance		4b.	\$0.00
4c. Home r	maintenance, repair, and upk	eep expenses		4c.	\$25.00

4d. Homeowner's association or condominium dues

4d.

\$0.00

Case 17-22755 Nancy

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Middle Name Last Name First Name

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$75.00
	6b. Water, sewer, garbage collection	6b.	\$25.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$75.00
	6d. Other. Specify:	6d.	\$0.00
7.	Food and housekeeping supplies	7.	\$150.00
8.	Childcare and children's education costs	8.	\$0.00
9.	Clothing, laundry, and dry cleaning	9.	\$25.00
10.	Personal care products and services	10.	\$25.00
11.	Medical and dental expenses	11.	\$25.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$175.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$10.00
14.	Charitable contributions and religious donations	14.	\$0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$0.00
	15b. Health insurance	15b.	\$0.00
	15c. Vehicle insurance	15c.	\$75.00
	15d. Other insurance. Specify:	15d.	\$0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$0.00
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$250.00
	17b. Car payments for Vehicle 2	17b.	
	17c. Other. Specify:	17c.	
	17d. Other. Specify:	17d.	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$799.28
19.	Other payments you make to support others who do not live with you. Specify:	19.	\$0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
	20a. Mortgages on other property	20a.	\$0.00
	20b. Real estate taxes	20b.	\$0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
	20e. Homeowner's association or condominium dues	20e.	\$0.00
Offici	al Form 106J Schedule J: Your Expenses		page

Documentilla Page 42 of 69 Debtor 2 Nancy Middle Name Last Name First Name 21. Other. Specify: 21. \$0.00 22. Calculate your monthly expenses. 22a. \$2,484.28 22a. Add lines 4 through 21. 22b. \$1,195.00 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. \$3,679.28 22c. 23. Calculate your monthly net income. 23a. \$3,636.93 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. 23b. Copy your monthly expenses from line 22c above. \$3,679.28 23c. Subtract your monthly expenses from your monthly income. (\$42.35)23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? **✓**No. None Yes.

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Filed 07/31/17

Doc 1

Case 17-22755

Debtor 1

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	Casc 11-2213	3 DUC 1	1 1100 07731717	Entered 07/51/17 14:05:52 Desc Mail	11
Fill in this informati	ion to identify your case	e:			
Debtor 1	Roberto First Name	Middle Name	Gradilla Last Name	Check if this is:	
Debtor 2	Nancy		Gradilla	☐ An amended filing	
(Spouse, if filing)	First Name	Middle Name	Last Name	☐A supplement showing post-petition	chapter 13
United States Ban	kruptcy Court for the:	Nort	hern District of Illinois	expenses as of the following date:	
Case number (if known)				MM / DD / YYYY	
Official Fo	rm 106J-2				

Schedule J-2: Expenses for Separate Household of Debtor 2

12/15

Use this form for Debtor 2's separate household expenses ONLY IF Debtor 1 and Debtor 2 maintain separate households. If Debtor 1 and Debtor 2 have one or more dependents in common, list the dependents on both Schedule J and this form. Answer the questions on this form only with respect to expenses for Debtor 2 that are not reported on Schedule J. Be as complete and accurate as possible. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Describe Your Household				
1.	Is this a joint case?				
	☐ No. Do not complete this form. ✓ Yes				
2.	Do you have dependents? Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a	☐ No ☑ Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 2:	Dependent's age	Does dependent live with you?
	dependent of Debtor 1 on Schedule J.		Child	19	⊈ 1 _{Yes.}
	Only list dependents		Child	18	□ No. ☑ Yes.
	Do not state the dependents' names.				☐No
					—
					— ☐Yes ☐No
					— ☐Yes
3.	Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?	☑ No □ Yes			
		=			
	Estimate Your Ongoing N			10 1	
	stimate your expenses as of your bankr e bankruptcy is filed.	uptcy filing date unless you are usin	g this form as a supplement in a Chapt	er 13 case to rep	ort expenses as of a date after
	clude expenses paid for with non-cash ch assistance and have included it on			You	r expenses
4.	The rental or home ownership expens ground or lot.	ses for your residence. Include first m	ortgage payments and any rent for the	4.	\$1,000.00
	If not included in line 4:				
	4a. Real estate taxes			4a	\$0.00
	4b. Property, homeowner's, or renter's i	nsurance		4b.	\$0.00_
	4c. Home maintenance, repair, and upke			4c.	\$50.00
	4d. Homeowner's association or condor			4d.	\$0.00

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Debtor 1 Roberto Debtor 2 Nancy

Documenatilla Page 44 of 69 Gradilla

Case number (if known)

First Name Middle Name Last Name

	Y	our expenses
5. Additional mortgage payments for your residence, such as home equity loans	5	
6. Utilities:		
6a. Electricity, heat, natural gas	6a	\$150.00
6b. Water, sewer, garbage collection	6b	\$50.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$200.00
6d. Other. Specify:	6d	\$0.00
7. Food and housekeeping supplies	7	\$350.00
Childcare and children's education costs	8	\$0.00
9. Clothing, laundry, and dry cleaning	9.	\$25.00
10. Personal care products and services	10.	\$50.00
11. Medical and dental expenses	11	\$50.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	\$200.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$20.00
14. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	14.	\$0.00
15. Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$100.00
15d. Other insurance. Specify: [place holder]	15d	\$0.00
16. Charitable contributions and religious donations Specify:	16.	\$0.00
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	
17b. Car payments for Vehicle 2	17b	
17c. Other. Specify:	17c	
17d. Other. Specify:	17d	
 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 	18.	\$0.00
19. Other payments you make to support others who do not live with you		
Specify:	19	\$0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income	e	
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues Official Form 106J-2 Schedule J-2: Expenses for Separate Househol	20e.	\$0.00

Doc 1 Filed 07/31/17 Entered 07/31/17 14:03:32 Case 17-22755 Desc Main Documenatilla Page 45 of 69 Debtor 1 Roberto Case number (if known) Debtor 2 Nancy Gradilla First Name Middle Name Last Name 21. Other. Specify: 21. \$0.00 22. Your monthly expenses. Add lines 5 through 21. The result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to calculate the \$1,195.00 total expenses for Debtor 1 and Debtor 2. 22. 23. Line not used on this form. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? **✓**No. None Yes.

Fill in this informati	on to identify your case	ə.			§1/17 14:03:32	Desc Main
			Document	Page 40 01 05		
Debtor 1	Roberto		Gradilla			
	First Name	Middle Name	Last Name			
Debtor 2	Nancy		Gradilla			
(Spouse, if filing)	First Name	Middle Name	Last Name	_		
United States Bank	kruptcy Court for the:	North	ern District of Illinois			
Case number				_		☐ Check if this is an
(if known)						amended filing
O(() = ! = 1	1000					
Official Fol	<u>rm 106Sum</u>					
Summary	of Your A	ssets an	d Liabilitie	es and Cert	ain Statisti	cal
	•					

Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00 \$5,433.51 \$5,433.51
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$3,268.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$3,535.54
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$216,123.78 \$222,927.32
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$3,636.93
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$2,484.28

Case 17-22755 Doc 1 Filed 07/31/17 Entered 07/31/17 14:03:32 Desc Main

Documentilla Page 47 of 69 Roberto Gradilla

Case number (if known)

\$64,210.54

Nancy First Name Middle Name Last Name Answer These Questions for Administrative and Statistical Records Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. **√** Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income. Copy your total current monthly income from Official \$6,074.36 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) \$3,535.54 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$60,675.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority \$0.00 claims. (Copy line 6g.) 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) \$0.00

9g. Total. Add lines 9a through 9f.

Fill in this informati	ion to identify your cas	e.			3 1/17 14:03	3:32 D	esc Main	
			Document	Page 48 UI	09			
Debtor 1	Roberto		Gradilla					
•	First Name	Middle Name	Last Name					
Debtor 2	Nancy		Gradilla					
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Bank	kruptcy Court for the:	North	ern District of Illinois					
Case number (if known)				_			Check if this is an amended filing	
	rm 106Dec ion About	an Individ	dual Debtor	's Sched	ules			12/15
You must file this for property by fraud in years, or both. 18 U.	orm whenever you file n connection with a b .S.C. §§ 152, 1341, 151	e bankruptcy scheo ankruptcy case car	esponsible for supplyir dules or amended sche n result in fines up to \$:	dules. Making a fal	se statement, conce	ealing prope	erty, or obtaining mone	y or
Sign B	selow							

ou pay or agree to pay someone who is NOT	
es. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
er penalty of perjury, I declare that I have reac	d the summary and schedules filed with this declaraion and that they are true and correct.
er penalty of perjury, I declare that I have read	d the summary and schedules filed with this declaraion and that they are true and correct.
er penalty of perjury, I declare that I have read /s/ Roberto Gradilla	d the summary and schedules filed with this declaraion and that they are true and correct. X /s/ Nancy Gradilla

ill in this informa	ation to identify your c	ase		37 /31/17 14:03:32	z Desciviain
	ation to identify year of	acc.	Document	Paye 49 01 0 9	
ebtor 1	Roberto		Gradilla		
	First Name	Middle Name	Last Name		
ebtor 2	Nancy		Gradilla		
Spouse, if filing)	First Name	Middle Name	Last Name		
nited States Bar	nkruptcy Court for the	: Nor	thern District of Illinois		
ase number known)				-	Check if this is an
,					amended filing
fficial Fo	orm 107				
		ncial Affa	aire for Indiv	iduals Eiling for Dan	kruptov
tateme	ent of Fina	nciai Alia	all'S for maiv	iduals Filing for Ban	Krupicy 04/
V I Married					
□ No	st 3 years, have you li		r than where you live now		
Not marrie	st 3 years, have you li		r than where you live now Do not include where you Dates Debtor 1 lived there		Dates Debtor 2 lived there
During the last No Yes. List al	st 3 years, have you li		Do not include where you Dates Debtor 1 lived	live now. Debtor 2:	there
During the last No No Yes. List al	st 3 years, have you li		Do not include where you Dates Debtor 1 lived	live now.	
During the last No Yes. List al	st 3 years, have you li		Do not include where you Dates Debtor 1 lived	Debtor 2: Same as Debtor 1 2729 Homan Ave	there
During the lass ☐ No ☐ Yes. List al ☐ Debtor 1	st 3 years, have you li		Do not include where you Dates Debtor 1 lived there From	Debtor 2: Same as Debtor 1	there Same as Debtor 1
During the lass ☐ No ☐ Yes. List al Debtor 1:	st 3 years, have you live		Do not include where you Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1 2729 Homan Ave	there Same as Debtor 1 From
During the lass ☐ No ☐ Yes. List al Debtor 1:	st 3 years, have you live		Do not include where you Dates Debtor 1 lived there From	Debtor 2: Same as Debtor 1 2729 Homan Ave Number Street Chicago, IL 60623	there Same as Debtor 1 From To
During the lass ☐ No ☐ Yes. List al ☐ Debtor 1	st 3 years, have you live Il of the places you live :		Do not include where you Dates Debtor 1 lived there From	Debtor 2: Same as Debtor 1 2729 Homan Ave Number Street	there Same as Debtor 1 From To
During the last No No Ves. List al Debtor 1:	st 3 years, have you live Il of the places you live :	ed in the last 3 years.	Do not include where you Dates Debtor 1 lived there From	Debtor 2: Same as Debtor 1 2729 Homan Ave Number Street Chicago, IL 60623	there Same as Debtor 1 From To
During the last No Ves. List al Debtor 1:	st 3 years, have you live Il of the places you live :	ed in the last 3 years.	Do not include where you Dates Debtor 1 lived there From	Debtor 2: Same as Debtor 1 2729 Homan Ave Number Street Chicago, IL 60623	there Same as Debtor 1 From To
During the last No No Ves. List al Debtor 1:	st 3 years, have you live Il of the places you live :	ed in the last 3 years.	Do not include where you Dates Debtor 1 lived there From To	Debtor 2: Same as Debtor 1 2729 Homan Ave Number Street Chicago, IL 60623 City State ZIF	there Same as Debtor 1 From To Code
Not married During the last No Ves. List all Debtor 1: Number S City	st 3 years, have you live Il of the places you live :	ed in the last 3 years.	Do not include where you Dates Debtor 1 lived there From To From	Debtor 2: Same as Debtor 1 2729 Homan Ave Number Street Chicago, IL 60623 City State ZIF	there Same as Debtor 1 From To Code Same as Debtor 1 From From From
During the last No No Ves. List al Debtor 1: Number S City	st 3 years, have you live : Street	ed in the last 3 years.	Do not include where you Dates Debtor 1 lived there From To	Debtor 2: Same as Debtor 1 2729 Homan Ave Number Street Chicago, IL 60623 City State ZIF	there Same as Debtor 1 From To Code Same as Debtor 1
Not married During the last No Ves. List all Debtor 1: Number S City	st 3 years, have you live : Street	ed in the last 3 years.	Do not include where you Dates Debtor 1 lived there From To From	Debtor 2: Same as Debtor 1 2729 Homan Ave Number Street Chicago, IL 60623 City State ZIF Same as Debtor 1 5030 W 25th Place FL2 Number Street	there Same as Debtor 1 From To Code Same as Debtor 1 From From From
During the last No Ves. List al Debtor 1: Number S Number S	st 3 years, have you live : Street	ed in the last 3 years.	Do not include where you Dates Debtor 1 lived there From To From	Debtor 2: Same as Debtor 1 2729 Homan Ave Number Street Chicago, IL 60623 City State ZIF	Same as Debtor 1 From To Code Same as Debtor 1 From To To To To To
Not married During the last No ✓ Yes. List all Debtor 1: Number S City	st 3 years, have you live : Street	ed in the last 3 years.	Do not include where you Dates Debtor 1 lived there From To From	Debtor 2: Same as Debtor 1 2729 Homan Ave Number Street Chicago, IL 60623 City State ZIF Same as Debtor 1 5030 W 25th Place FL2 Number Street Chicago, IL 60804	there Same as Debtor 1 From To Code Same as Debtor 1 From To To To
During the last No Ves. List al Debtor 1: Number S Number S	st 3 years, have you live : Street	ed in the last 3 years.	Do not include where you Dates Debtor 1 lived there From To From	Debtor 2: Same as Debtor 1 2729 Homan Ave Number Street Chicago, IL 60623 City State ZIF Same as Debtor 1 5030 W 25th Place FL2 Number Street Chicago, IL 60804	there Same as Debtor 1 From To Code Same as Debtor 1 From To To To To

City

Number Street

4920 W 30th St 2R

Number Street

Cicero, IL 60804 City

From ___

То

State ZIP Code

From_

То

State ZIP Code

Deb	tor 1 tor 2	Case	2 17-22755 Nancy	Doc 1 Filed 07 Docun	n e natiila Pa	ntered 07/3 ge 50 of 69	31/17 14:03:32 _{mber}	esc,Main ———
			First Name	Middle Name	Last Name			
				From		ame as Debtor 1 48 S Christiana A	ove 1	☐ Same as Debtor 1
	Number S	Street		From To		nber Street	WC I	To
						icago, IL 60623		_
	City		State ZIP 0	Code	City		State ZIP Code	_
ir	nclude Arizo	ona, Califor	nia, Idaho, Louisiana	rith a spouse or legal equi , Nevada, New Mexico, Pu Your Codebtors (Official Fo	erto Rico, Texas		- ,	y property states and territories
Par	t 2: Exp	lain the	Sources of Your	Income				
F If	ill in the tot you are fili	al amount ong a joint ca	of income you receive ase and you have inco	nt or from operating a bused from all jobs and all busome that you receive togeth	inesses, includin	g part-time activit		
5	Yes. Fill	in the deta	ils.					
				Debtor 1			Debtor 2	
				Sources of income Check all that apply.	Gross In (before d exclusion	eductions and	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)
		ıary 1 of cu led for bar	ırrent year until the ıkruptcy:	✓ Wages, commission bonuses, tips ☐ Operating a busines		\$14,441.27	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$9,411.09
		l endar yea ı to Decemb	r: er 31, <u>2016</u> YYYY	✓ Wages, commission bonuses, tips✓ Operating a busines		\$50,154.00	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$29,684.00
		-	r before that: er 31, <u>2015</u>)	✓ Wages, commission bonuses, tips		\$21,396.00	✓ Wages, commissions, bonuses, tips	\$29,307.00
			YYYY	Operating a busines	SS		Operating a business	
lr p h L	nclude inco ayments; p ave income	me regardle ensions; re that you re	ess of whether that in ental income; interest; eceived together, list i	his year or the two previo come is taxable. Examples dividends; money collected t only once under Debtor 1. each source separately. D	of other income d from lawsuits; i	are alimony; chilo oyalties; and gan	nbling and lottery winnings. If yo	nployment, and other public benefi ou are filing a joint case and you
	_	in the deta	ils.					
				Debtor 1			Debtor 2	

First Name

Middle Name

Case 17-22755 Doc 1 Filed 07/31/17 Entered 07/31/17 14:03:32 nmber (Pency) Main Documeratina Page 51 of 69

Last Name

		f current year until the bankruptcy:	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross Income from each csoure (before deductions and exclusions)
	c alendar y y 1 to Dece	rear: ember 31, <u>2016</u> YYYY)				
	•	rear before that: ember 31, 2015 YYYYY				
6. Are either □No. ☑Yes.	Neither I individual During the No. G	I primarily for a personal, fare 90 days before you filed for to line 7. List below each creditor to creditor. Do not include p payments to an attorney for to adjustment on 4/01/19 are possible of the poss	primarily consumer debts mily, or household purpose. or bankruptcy, did you pay a whom you paid a total of \$6 ayments for domestic suppor this bankruptcy case. Indevery 3 years after that for primarily consumer debts or bankruptcy, did you pay a whom you paid a total of \$6 ayments for bankruptcy.	ny creditor a total of \$6,425* or n 6,425* or more in one or more pa ort obligations, such as child su or cases filed on or after the date	ayments and the total amorpport and alimony. Also, doe of adjustment.	unt you paid that o not include
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Creditor Number City	Street	Code	· -		☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors ☐ Other

		First Nam	ie	Middle Na	ame	Last Name		
								☐Mortgage
	Creditor's N	Jame						Car
	Creditor 3 is	ane						☐ Credit card
	Number	Street						☐ Loan repayment
					-			Suppliers or vendors
								☐ Other
	City	- (State ZII	P Code				
proprietoi √ No		101. Include	e payments			oligations, such as child su		one for a business you operate as a sole
					tes of ment	Total amount paid	Amount you still owe	Reason for this payment
Insider's								
Number	Street					-		
City		State	ZIP Code					
Insider's	Name							
	Street					-		
Number		State	ZIP Code	_				
Number		Ciaio						
City Within 1	year before y	you filed for				ayments or transfer any	property on account of a	a debt that benefited an insider?

payment

Include creditor's name

or 2	Nancy		1 G hadilla Page	30 01 03		
	First Name	Middle Name	Last Name			
Insider's Name						
Number Str	eet					
0''	21.0					
City	State ZIP Code					
Insider's Name						
Number Str	eet					
City	State ZIP Code					
Within 1 year but List all such madisputes.	Ey Legal Actions, Repos Defore you filed for bankrupto tters, including personal injury	cy, were you a party in an	y lawsuit, court act	on, or administrative pro ion suits, paternity action	oceeding? s, support or custo	ody modifications, and con
Within 1 year b List all such ma disputes.	pefore you filed for bankrupto tters, including personal injury	cy, were you a party in an	y lawsuit, court act	on, or administrative pro ion suits, paternity action	oceeding? s, support or custo	ody modifications, and cor
Within 1 year b List all such ma disputes. ☐ No	pefore you filed for bankrupto tters, including personal injury	cy, were you a party in an	y lawsuit, court act ns, divorces, collect	on, or administrative pro ion suits, paternity action:	oceeding? s, support or custo	ody modifications, and con
Within 1 year b List all such ma disputes. ☐ No	pefore you filed for bankrupto tters, including personal injury	cy, were you a party in any cases, small claims action	y lawsuit, court actins, divorces, collect	Court or agency	s, support or custo	Status of the case
Within 1 year built all such mandisputes. No Yes. Fill in the	pefore you filed for bankrupto tters, including personal injury ne details.	cy, were you a party in any cases, small claims action	y lawsuit, court actins, divorces, collect	Court or agency Cook County Circuit Court Ourt Name 0 W Washington St	s, support or custo	Status of the case
Within 1 year be List all such madisputes. No Yes. Fill in the	pefore you filed for bankrupto tters, including personal injury me details. Carlos Aillow v Nancy Gradilla	cy, were you a party in any cases, small claims action	y lawsuit, court act ns, divorces, collect C	Court or agency Cook County Circuit Court ourt Name 0 W Washington St umber Street Chicago, IL 60602-1305	s, support or custo	Status of the case Pending On appeal
Within 1 year besist all such mandisputes. ☑ No ☑ Yes. Fill in the	pefore you filed for bankrupto tters, including personal injury ne details. Carlos Aillow v Nancy Gradilla 2013M1711263 Spann Lindareen v Roberto	cy, were you a party in any cases, small claims action	y lawsuit, court actins, divorces, collect	Court or agency Cook County Circuit Court ourt Name 0 W Washington St umber Street Chicago, IL 60602-1305 ty S Cook County Circuit Court	t ZIP Code	Status of the case Pending On appeal
Within 1 year be the state of t	pefore you filed for bankrupto tters, including personal injury ne details. Carlos Aillow v Nancy Gradilla 2013M1711263	ey, were you a party in any cases, small claims action. Nature of the case Civil	y lawsuit, court actins, divorces, collections, divorces,	Court or agency Cook County Circuit Court ourt Name 0 W Washington St umber Street Chicago, IL 60602-1305 ty S Cook County Circuit Court ourt Name 0 W Washington St	t ZIP Code	Status of the case Pending On appeal Concluded
Within 1 year be List all such madisputes. ☐ No ☐ Yes. Fill in the Case title Case title Case title	pefore you filed for bankrupto tters, including personal injury ne details. Carlos Aillow v Nancy Gradilla 2013M1711263 Spann Lindareen v Roberto Gradilla	ey, were you a party in any cases, small claims action. Nature of the case Civil	y lawsuit, court actins, divorces, collections, divorces,	Cook County Circuit Court Dourt Name O W Washington St Uniter Street Chicago, IL 60602-1305 Cook County Circuit Court Dourt Name O W Washington St Uniter Street Chicago, IL 60602-1305 Cook County Circuit Court Dourt Name O W Washington St Uniter Street Chicago, IL 60602-1305	t ZIP Code	Status of the case Pending On appeal Concluded Pending On appeal
Within 1 year be List all such mandisputes. No Yes. Fill in the Case title Case title Case title Case number Within 1 year	pefore you filed for bankrupto tters, including personal injury ne details. Carlos Aillow v Nancy Gradilla 2013M1711263 Spann Lindareen v Roberto Gradilla 1999 L 010996 before you filed for bankrupto	ey, were you a party in any cases, small claims action. Nature of the case. Civil Personal Injury.	y lawsuit, court actions, divorces, collections, divorces, divorces, collections, divorces, divorces	Court or agency Cook County Circuit Court ourt Name 0 W Washington St umber Street Chicago, IL 60602-1305 ty S Cook County Circuit Court ourt Name 0 W Washington St umber Street Chicago, IL 60602-1305 ty S	t ZIP Code	Status of the case Pending On appeal Concluded Pending On appeal Concluded
Within 1 year be List all such madisputes. No Yes. Fill in the Case title Case title Case title Case number Within 1 year	pefore you filed for bankrupto tters, including personal injury the details. Carlos Aillow v Nancy Gradilla 2013M1711263 Spann Lindareen v Roberto Gradilla 1999 L 010996 before you filed for bankrupto apply and fill in the details belo	ey, were you a party in any cases, small claims action. Nature of the case. Civil Personal Injury.	y lawsuit, court actions, divorces, collections, divorces, divorces, collections, divorces, divorces	Court or agency Cook County Circuit Court ourt Name 0 W Washington St umber Street Chicago, IL 60602-1305 ty S Cook County Circuit Court ourt Name 0 W Washington St umber Street Chicago, IL 60602-1305 ty S	t ZIP Code	Status of the case Pending On appeal Concluded Pending On appeal Concluded

Case 17,22755 Doc 1 Filed 07/31/17 Entered 07/31/17 14:03:32 Description Main

Debtor 1

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First Name Middle Name Last Name

	Describe the property	Date	Value of the property
Fuetos Finance	2013 Ford Utility Passenger VIN #		
Exeter Finance Creditor's Name	1FMCU0F79DUA91575	06/30/2017	\$5,000.00
Po Box 166097 Number Street	Explain what happened		
	✓ Property was repossessed.		
L : TV 75040 0007	Property was foreclosed.		
Irving, TX 75016-6097 City State ZIP Cod	Property was garnished.		
,	Property was attached, seized, or levied.		
	Describe the property	Date	Value of the property
Creditor's Name			
Number Street	Explain what happened		
	Property was repossessed.		
	Property was foreclosed.		
	Property was garnished. Property was attached, seized, or levied.		
City State ZIP Cod	, . ,		
ake a payment because you owed a debt? No Yes. Fill in the details.			
Í No			
Í No	Describe the action the creditor took	Date action was taken	Amount
Í No	Describe the action the creditor took		Amount
No Yes. Fill in the details. Creditor's Name	Describe the action the creditor took		Amount
No Yes. Fill in the details. Creditor's Name	_		Amount
No Yes. Fill in the details. Creditor's Name Number Street	Describe the action the creditor took Last 4 digits of account number: XXXX		Amount
No Yes. Fill in the details. Creditor's Name Number Street	_		Amount
No Yes. Fill in the details. Creditor's Name Number Street City State ZIP Code ithin 1 year before you filed for bankruptcy, was	_	taken	
No Yes. Fill in the details. Creditor's Name Number Street City State ZIP Code (ithin 1 year before you filed for bankruptcy, was custodian, or another official?	Last 4 digits of account number: XXXX	taken	
No Yes. Fill in the details. Creditor's Name Number Street City State ZIP Code Vithin 1 year before you filed for bankruptcy, was custodian, or another official?	Last 4 digits of account number: XXXX	taken	
No Yes. Fill in the details. Creditor's Name Number Street City State ZIP Code Vithin 1 year before you filed for bankruptcy, was custodian, or another official?	Last 4 digits of account number: XXXX	taken	
No Yes. Fill in the details. Creditor's Name Number Street City State ZIP Code Vithin 1 year before you filed for bankruptcy, was custodian, or another official? No Yes	Last 4 digits of account number: XXXXs any of your property in the possession of an assignee	taken	
No Yes. Fill in the details. Creditor's Name Number Street City State ZIP Code	Last 4 digits of account number: XXXXs any of your property in the possession of an assignee	taken	
No Yes. Fill in the details. Creditor's Name Number Street City State ZIP Code (ithin 1 year before you filed for bankruptcy, was custodian, or another official? (No) Yes	Last 4 digits of account number: XXXXs any of your property in the possession of an assignee	taken	
No Yes. Fill in the details. Creditor's Name Number Street City State ZIP Code fithin 1 year before you filed for bankruptcy, was custodian, or another official? No Yes List Certain Gifts and Contribution	Last 4 digits of account number: XXXXs any of your property in the possession of an assignee	for the benefit of credito	
No Yes. Fill in the details. Creditor's Name Number Street City State ZIP Code //ithin 1 year before you filed for bankruptcy, was custodian, or another official? No Yes 1 No Yes List Certain Gifts and Contribution thin 2 years before you filed for bankruptcy, did	Last 4 digits of account number: XXXX any of your property in the possession of an assignee	for the benefit of credito	
No Yes. Fill in the details. Creditor's Name Number Street City State ZIP Code //ithin 1 year before you filed for bankruptcy, was custodian, or another official? No Yes List Certain Gifts and Contribution	Last 4 digits of account number: XXXX any of your property in the possession of an assignee	for the benefit of credito	

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First Name Middle Name Last Name

person	per Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			
Jumber Street			
City State ZIP Cod	de		
Person's relationship to you			
Gifts with a total value of more than \$600 person	per Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			
lumber Street			
ity State ZIP Cod	de		
Person's relationship to you			
Person's relationship to you	cy, did you give any gifts or contributions with a t	otal value of more than \$600 to any	charity?
Person's relationship to you		otal value of more than \$600 to any	charity?
Person's relationship to you fithin 2 years before you filed for bankrupt	cy, did you give any gifts or contributions with a to	otal value of more than \$600 to any	charity?
Person's relationship to you Within 2 years before you filed for bankrupt	cy, did you give any gifts or contributions with a tobution.	otal value of more than \$600 to any Date you contributed	charity? Value
Person's relationship to you fithin 2 years before you filed for bankrupt No Yes. Fill in the details for each gift or contri Gifts or contributions to charities that	cy, did you give any gifts or contributions with a tobution.	Date you	
Person's relationship to you fithin 2 years before you filed for bankrupt No Yes. Fill in the details for each gift or contri Gifts or contributions to charities that	cy, did you give any gifts or contributions with a tobution.	Date you	
Person's relationship to you Ithin 2 years before you filed for bankrupt No Yes. Fill in the details for each gift or contri Gifts or contributions to charities that total more than \$600	cy, did you give any gifts or contributions with a tobution.	Date you	
Person's relationship to you Ithin 2 years before you filed for bankrupt No Yes. Fill in the details for each gift or contri Gifts or contributions to charities that total more than \$600	cy, did you give any gifts or contributions with a tobution.	Date you	
Person's relationship to you Ithin 2 years before you filed for bankrupt No Yes. Fill in the details for each gift or contri Gifts or contributions to charities that total more than \$600	cy, did you give any gifts or contributions with a tobution.	Date you	
Person's relationship to you Ithin 2 years before you filed for bankrupt No Yes. Fill in the details for each gift or contri Gifts or contributions to charities that total more than \$600 Charity's Name	cy, did you give any gifts or contributions with a tobution.	Date you	
Person's relationship to you Ithin 2 years before you filed for bankrupt No Yes. Fill in the details for each gift or contri Gifts or contributions to charities that total more than \$600 Charity's Name	cy, did you give any gifts or contributions with a tobution.	Date you	
Person's relationship to you Ithin 2 years before you filed for bankrupt No Yes. Fill in the details for each gift or contri Gifts or contributions to charities that total more than \$600 Charity's Name	cy, did you give any gifts or contributions with a tobution.	Date you	
Person's relationship to you Ithin 2 years before you filed for bankrupt No Yes. Fill in the details for each gift or contri Gifts or contributions to charities that total more than \$600 Charity's Name Number Street City State ZIP Code 6: List Certain Losses	cy, did you give any gifts or contributions with a to bution. Describe what you contributed	Date you contributed	Value
Person's relationship to you Ithin 2 years before you filed for bankrupt No Yes. Fill in the details for each gift or contri Gifts or contributions to charities that total more than \$600 Charity's Name Number Street City State ZIP Code 6: List Certain Losses	cy, did you give any gifts or contributions with a tobution.	Date you contributed	Value

1 2	Case Roberto /55 Nancy	Doc 1 Filed Do	0 0 / /31/11/ OCUM © iladiilla	Page 56 of 69	14:03:32 Desc _n Main
	First Name	Middle Name	Last Nam	е	

First Name	Middle Name	Last Name		
Describe the property you lost and	Describe any insurar	nce coverage for the loss	Date of your loss	Value of property loss
how the loss occurred		at insurance has paid. List pending ne 33 of <i>Schedule A/B: Property</i> .		
List Certain Payments or	Transfers			
		e else acting on your behalf pay or tra	nsfer any property to anyon	e you consulted about s
nkruptcy or preparing a bankruptcy lude any attorneys, bankruptcy petition		nseling agencies for services required in	n your bankruptcy.	
No				
Yes. Fill in the details.				
Duenez Lerene	Description and va	alue of any property transferred	Date payment or transfer was made	Amount of payment
Duenez, Lorena Person Who Was Paid	Attorney's Fee; Attor	nev's Fees	transier was made	
OZOO Datelat Phyl Ota OEO	Allomey 3 Tee, Allo	ney 31 ees	Jul 31, 2017	\$1,300.00
2700 Patriot Blvd Ste 250 Number Street				
Carot.			01/12/2017	\$200.00
Glenview, IL 60026-8021				
City State ZIP Cod	e			
Lmduenez@gmail.com				
Email or website address				
Person Who Made the Payment, if Not Y	′ou			
	Description and va	alue of any property transferred	Date payment or	Amount of payment
Abacus Credit Counseling			transfer was made	
Person Who Was Paid	Credit Counseling (Course		
15760 Ventura Boulevard 700			Feb 02, 2017	\$25.00
Number Street				
	_			
Encino, CA 91436 City State ZIP Cod	10			
•	le			
www.abacuscc.org				
Email or website address				
	′ou			

deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

V	Νo
ч	140

Yes. Fill in the details.

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F	First Name	Middle Name	Last Name			
		Description and va	alue of any property	ransferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid						
Number Street						
City	State ZIP Code	_				
ourse of your business	s or financial affair sfers and transfers	rs? s made as security (suc	ch as the granting of a		anyone, other than property nortgage on your property).	transferred in the or
Yes. Fill in the details						
		Description and vertransferred	alue of property	Describe any pro or debts paid in	operty or payments received exchange	d Date transfer was made
Person Who Received	Transfer					
Number Street						
City Person's relationship to	State ZIP Code					
Danier Wha Danier d	T					
Person Who Received	ransier					
Number Street						
-	712.0					
City Person's relationship to	State ZIP Code you					
Vithin 10 years before y		ruptcy, did you transfe	er any property to a so	elf-settled trust or sir	nilar device of which you a	e a beneficiary?(The
∕ INo						
Yes. Fill in the details						
		Description and va	alue of the property	ransferred		Date transfer was made
Name of trust						

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First Name Middle Name Last Name

		instrument	closed, sold, moved, or transferred	before closing of transfer
Name of Financial Institution	XXXX	☐ Checking ☐ Savings		
Number Street		☐ Money market ☐ Brokerage ☐ Other		
City State ZIP Co	ode			
Name of Financial Institution	xxxx	☐ Checking ☐ Savings		
Number Street		☐ Money market		
		Brokerage		
City State ZIP Co		☐ Brokerage ☐ Other		
o you now have, or did you have within	ode n 1 year before you filed for bankruptcy, any safe	☐ Brokerage ☐ Other	itory for securities, cash, or oth	ner valuables?
o you now have, or did you have within		☐ Brokerage ☐ Other		
o you now have, or did you have within	n 1 year before you filed for bankruptcy, any safe	☐ Brokerage ☐ Other e deposit box or other depose		Do you still hav
o you now have, or did you have within ☑ No ☑ Yes. Fill in the details.	n 1 year before you filed for bankruptcy, any safe Who else had access to it?	☐ Brokerage ☐ Other e deposit box or other depose		Do you still havit?

Debtor 1 Case Roberto 755 Debtor 2 Nancy First Name	Docum e atilla Pag	ntered 07/31/17 14:03:32mber	şç"Main ——
riistivaille	Middle Name Last Name		
			□No
Name of Storage Facility	Name		Yes
Number Street	Number Street		
	_		
	City State ZIP Code		
City State ZIP Code	_		
Part 9: Identify Property You Hold of	r Control for Someone Else		
23. Do you hold or control any property that some	eone else owns? Include any property you b	orrowed from, are storing for, or hold in trust for s	someone.
☑ No			
Yes. Fill in the details.	Whom is the constant O	Barrella di amananta	Volum
	Where is the property?	Describe the property	Value
	_		
Owner's Name	Number Street		
Number Street			
	_ City State ZIP Code	_	
	_		
City State ZIP Code			
Part 10: Give Details About Environn	montal Information		
For the purpose of Part 10, the following definition		Illution, contamination, releases of hazardous or	toxic substances, wastes
		g statutes or regulations controlling the cleanup	
Site means any location, facility, or property a including disposal sites.	as defined under any environmental law, who	ether you now own, operate, or utilize it or used to	o own, operate, or utilize it,
Hazardous material means anything an environment, or similar term.	ronmental law defines as a hazardous waste	e, hazardous substance, toxic substance, hazard	ous material, pollutant,
Report all notices, releases, and proceedings that	t you know about, regardless of when they	occurred.	
24. Has any governmental unit notified you that y	ou may be liable or potentially liable under o	r in violation of an environmental law?	
☑No			
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
	City State ZIP Code		
City State ZIP Code	_		
25. Have you notified any governmental unit of an ✓ No	ny release of hazardous material?		
Yes. Fill in the details.			

First Name

Middle Name

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Last Name

Number Street Number Street Number Street City State ZIP Code					
Number Street City State ZIP Code Court or agency Neture of the case Status of the Case Status of the Case Italian the details. Court or agency Neture of the case Status of the Case Italian or Street Case rumber Case Italian or Street Case rumber Case Italian or Street Case Turnber Case Italian or Street		Governmental unit	Environmental law	, if you know it	Date of notice
City State ZIP Code ave you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. A lo JYes. Fill in the details. Court or agency Nature of the case Status of the Court Name Pending On appeal Concluded Case number Case number City State ZIP Code Case number Street City State ZIP Code Case number Street City State ZIP Code A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership A partner in a partnership or require securities of a corporation An owner of at least 5% of the voting or equiry securities of a corporation An owner of at least 5% of the voting or equiry securities of a corporation Shounder of the above applies. Go to Part 12. Jives. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN:	Name of site	Governmental unit			
City State ZIP Code ave you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No No Noes Street Case tittle					
Case title	Number Street	Number Street			
we you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details.		City State ZIP Code			
Yes. Fill in the details. Court or agency Nature of the case Status of the	City State ZIP Code	_			
Case title		ninistrative proceeding under any environme	ental law? Include settle	ments and orders.	
Case number Case number Case number City State ZIP Code State ZIP Code	Yes. Fill in the details.	Court or agency	Nature of the case		Status of the ca
Case number Case number Case number City State ZIP Code State ZIP Code	Casa titla				D - "
Case number City State ZIP Code Name City State ZIP Code Name of accountant or bookkeeper City State ZIP Code Name of accountant or bookkeeper Name Street Name of accountant or bookkeeper	Case title	Court Name			☐On appeal
Tithin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership A no fificer, director, or managing executive of a corporation An omitor, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN:		Number Street			Concluded
Tithin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN:	Case number	City State ZIP Code			
Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN:	☐ A partner in a partnership☐ An officer, director, or managing ex☐ An owner of at least 5% of the votir	ecutive of a corporation	_ ,		
Number Street Name of accountant or bookkeeper Dates business existed FromTo	Yes. Check all that apply above and fill in	the details below for each business.			
Number Street Name of accountant or bookkeeper Dates business existed FromTo Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN: Number Street Name of accountant or bookkeeper Dates business existed FromTo		Describe the nature of the busines			ımber or ITIN.
Name of accountant or bookkeeper Dates business existed From	Name	_	E	IN:	
City State ZIP Code Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN:	Number Street	Name of accountant or bookkeepe	r Da	tes business existed	
Name Number Street Name of accountant or bookkeeper Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN:		_	F	romTo	
Name Do not include Social Security number or ITIN.	City State ZIP Code		o En		_
Number Street Name of accountant or bookkeeper Dates business existed FromTo	Name	Describe the nature of the busines	S	nployer Identification number	
Name of accountant or bookkeeper Dates business existed From To		Describe the nature of the busines —			
	Normaliana Otanant	Describe the nature of the busines	Do	not include Social Security nu	ımber or ITIN.
	Number Street	_	E	not include Social Security nu	ımber or ITIN.
City State ZIP Code	Number Street	_	E Da	not include Social Security nu IN:	imber or ITIN.

First Name

Middle Name

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Last Name

	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Name		EIN:
Number Street		
Number Street	Name of accountant or bookkeeper	Dates business existed
		FromTo
City State ZIP Code		
28. Within 2 years before you filed for bankruptcy, diparties.	id you give a financial statement to anyone about your b	usiness? Include all financial institutions, creditors, or other
√ 1 No		
Yes. Fill in the details below.		
	Date issued	
Name	MM/DD/YYYY	
Number Street		
City State ZIP Code		
Part 12: Sign Below		
I have read the encurer on this Statement of	Financial Affairs and any attachments and I declare	under moneth, of new my that the appropriate and
correct. I understand that making a false state	ement, concealing property, or obtaining money or pr	under penalty of perjury that the answers are true and roperty by fraud in connection with a bankruptcy case
can result in tines up to \$250,000, or imprisoni	ment for up to 20 years, or both. 18 U.S.C. §§ 152, 134	1, 1519, and 3571.
X /s/ Roberto Gradilla	X /s/ Nancy (Gradilla
Signature of Debtor 1	Signature of Debtor 2	<u> </u>
Date 07/31/2017	Date 07/31/2017	
D' 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ement of Financial Affairs for Individuals Filing for B	ankruptcy (Official Form 107)?
✓No		
☑ No ☐ Yes	not an attorney to help you fill out bankruptcy forms?	
☑ No ☐ Yes	not an attorney to help you fill out bankruptcy forms?	

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United States Bankruptcy Court Northern District of Illinois

In i Gra		a, Roberto			
				Case No	
De	otor			Chapter	7
		DISCLOSURE O	OF COMPENSATION OF ATTORNEY	FOR DEBTOR	र
1.	n b	amed debtor(s) and that compand ankruptcy, or agreed to be paid	and Fed. Bankr. P. 2016(b), I certify bensation paid to me within one year d to me, for services rendered or to be in connection with the bankruptcy ca	r before the fi be rendered o	ling of the petition in n behalf of the
	F		d to accept		\$1,500.00
	P	rior to the filing of this stateme	ent I have received		\$1,500.00
	B	alance Due			\$0.00
2.	The	e source of the compensation	to be paid to me was:		
		☑ Debtor	Other (specify)		
3.	The	e source of compensation to b	e paid to me is:		
		☑ Debtor	Other (specify)		
4.	☑ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.				
	per	rsons who are not members or	ove-disclosed compensation with a cassociates of my law firm. A copy of of the people sharing in the compen	the agreemer	nt,
5.		return for the above-disclosed the bankruptcy case, including	fee, I have agreed to render legal se :	rvice for all as	spects
	a.	Analysis of the debtor's final in determining whether to file	ncial situation, and rendering advice a petition in bankruptcy;	to the debtor	
	b.	Preparation and filing of any which may be required;	petition, schedules, statements of a	ffairs and plar	า

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

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B2030 (Form 2030)(12/15)		Document	Page 63 of 69	

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

07/31/2017/s/ Duenez Law LLCDateSignature of Attorney

Lorena Duenez LLC
Name of law firm

Case 17-22755 Doc 1 INFINE ON THE BEAUTION OF 184 17 14:03:32 Desc Main Discriment distriction (Chicago)

IN RE: Gradilla, Roberto Gradilla, Nancy

CASE NO

CHAPTER 7

v	VERIFICATION OF CREDITOR MATRIX			
The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge				
Date 07/31/2017	Signature	/s/ Roberto Gradilla		
Date 07/31/2017	Signature	/s/ Nancy Gradilla		

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AFNI

Po Box 3517 Bloomington, IL 61702-3517

Allied Interstate LLC Po Box 361477 Columbus, OH 43236-1477

AMCA Collection Agency 4Westchester Plz Bldg 4 Elmsford, NY 10523-1612

Asset Acceptance, LLC Po Box 2036 Warren, MI 48090-2036

Bank of America PO Box 982235 El Paso, TX 79998-2235

Capital Management Services LP 698 1/2 S Ogden St Buffalo, NY 14206-2317

Conserve 200 CrossKeys Office Park Fairport, NY 14450-0007

Convergent Outsourcing Inc Po Box 9004 Renton, WA 98057-9004

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Credit Collection Services 725 Canton St Norwood, MA 02062-2679

Dynamic Recovery Solutions Po Box 25759 Greenville, SC 29616-0759

Enhanced Recovery Corp Po Box 57547 Jacksonville, FL 32241-7547

ERC Po Box 1259 98696 Oaks, PA 19456-1259

Exeter Finance Po Box 166097 Irving, TX 75016-6097

Eye Center Physicians Ltd 1725 W Harrison St Ste 906 Chicago, IL 60612-3848

First National Collection Bureau Inc 610 Waltham Way Mccarran, NV 89434-6695

Fulton Friedman & Gullace LLP Po Box 2123 Warren, MI 48090-2123

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Great Lakes Higher Education 2401 International Ln Madison, WI 53704-3121

Heller and Frisone, Ltd 33 N La Salle St Ste 1200 Chicago, IL 60602-3415

JA SFR LLC 626 W Randolph St Ste 1 Chicago, IL 60661-2213

Kremin David K & Associates 221 N LaSalle St 1900 Chicago, IL 60601

Midland Credit Management Inc 2365 Northside Dr # 300 San Diego, CA 92108-2709

National Credit Management PO Box 32900 Saint Louis, MO 63132-8900

Navient Po Box 9655 Wilkes Barre, PA 18773-9655

North Shore Agency 270 Spagnoli Rd Ste 110 Melville, NY 11747-3515

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Paper Street Realty 1641 W Carroll Ave # 201 Chicago, IL 60612-2501

Penn Credit Corporation 916 S 14th St, PO Box 988 Harrisburg, PA 17108-0988

Recovery Partners LLC 4151 N Marshall Way Ste 12 Scottsdale, AZ 85251-3839

RJM Acquisitions LLC 575 Underhill Blvd # 224bldv Syosset, NY 11791-3426

Roosevelt University Office of Tuition 430 S. Michigan Ave Chicago, IL 60605

Rosales, Alma D Chicago, IL

RPM LLC 20816 44th Ave W Lynnwood, WA 98036-7744

SKO Brenner American Inc Po Box 230 Farmingdale, NY 11735-0230

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Southwest Credit 4120 International Pkwy Ste 1100 Carrollton, TX 75007-1958

Stuart LI pman and Associates Inc 5447 E 5th St Ste 110 Tucson, AZ 85711-2345

T Mobile Po Box 53410 Bellevue, WA 98015-3410

Total Finance LLC 3400 N Pulaski Rd Chicago, IL 60641-4023

TrustMark Recovery Services 541 Otis Bowen Dr Munster, IN 46321-4158

University of Illinois at Chicago M/C Billing and Collections 801 S Paulina Chicago, IL 60612-7210

Universtiy Pathologists 5700 Southwyck Blvd Toledo, OH 43614-1509

US Department of Education PO Box 7202 Utica, NY 13504-7202